



HAWAII STATE ETHICS COMMISSION
DISCLOSURE OF FINANCIAL INTERESTS (FORM D-201)

HAWAII STATE ETHICS COMMISSION 1001 Bishop Street, Pacific Tower Suite 970 P.O. Box 616 Honolulu, Hawaii 96809 Telephone: 587-0460 Fax: 587-0470 email: ethics@ethics.state.hi.us		For Office Use Only DATE REC'D: 12/30/2002 FILE NO.: 02-D-11264 Rev. 12/01 Representative	
IMPORTANT: Please read instructions carefully before filling out this form.			
FULL NAME (Last, First, Middle) SONSON, ALEX, MORALES		SPOUSE'S FULL NAME (Last, First, Middle) SONSON, JENNIFER, CORREA	
DEPENDENT CHILDREN'S FULL NAMES (Last, First, Middle) SONSON, MICHAEL, ALEXANDER SONSON, MARIE, ADELLE			
RESIDENCE ADDRESS [REDACTED]			
MAILING ADDRESS [REDACTED]			
BUSINESS TELEPHONE 586-6520	STATE DEPARTMENT/DIVISION OR BOARD/COMMISSION HOUSE OF REPRESENTATIVES		
RESIDENCE TELEPHONE [REDACTED]	STATE POSITION HELD REPRESENTATIVE	TERM OF OFFICE: Begin: 11/6/2002 End: 11/2/2004	

FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, SPOUSE, AND DEPENDENT CHILDREN.
USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer.

ITEM 1: INCOME FOR SERVICES RENDERED FOR PRECEDING CALENDAR YEAR

List the source (the term "source" also includes any state or other government agencies) and amount of all income of \$1,000 or more received during the preceding calendar year, for services rendered, and the nature of the services rendered.

F,SP,DC,JT	NAME AND ADDRESS OF SOURCE OF INCOME	AMOUNT	SERVICES RENDERED
JT	Law Office of Alex M. Sonson 94-210 Pupukahi St., Ste. 204 Waipahu, Hawaii 96797	E	Legal Services

☐ Check here if entry is None

☐ Check here if additional sheets are attached

ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List the amount and identity of every ownership or beneficial interest held during the disclosure period in any business incorporated, regulated, or licensed to carry on business in the State if the interest has a value of \$5,000 or more or is equal to 10% or more of the ownership of the business.

F,SP, DC,JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES
F	Law Office of Alex M. Sonson 94-210 Pupukahi St., Ste. 204 Waipahu, Hawaii 96797	Law Office	Owner	100%

☐ Check here if entry is None☐ Check here if additional sheets are attached**ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES**

List any ownership or beneficial interests in businesses transferred during the disclosure period and the date of transfer.

F,SP, DC,JT	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD	DATE OF TRANSFER

☒ Check here if entry is None☐ Check here if additional sheets are attached**ITEM 4: CREDITORS**

List the name and address of each creditor to whom the value of \$3,000 or more was owed during the disclosure period and the original amount and amount outstanding (excluding debts arising out of retail transactions or the purchase of consumer goods).

F,SP, DC,JT	NAME OF CREDITOR AND ADDRESS	ORIGINAL AMOUNT OWED	AMOUNT OUTSTANDING
JT	Central Pacific Bank 94-210 Pupukahi St. Waipahu, Hawaii 96797	H	G
JT	Fairfield Acceptance Corporation 10750 West Charleston Blvd. Suite 130 Las Vegas, NV 89135	C	C

☐ Check here if entry is None☐ Check here if additional sheets are attached

ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS

List every officership, directorship, trusteeship, or other fiduciary relationship held during the disclosure period in any business or organization, the term of office, and the annual compensation.

F,SP, DC,JT	NAME AND ADDRESS OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION

☒ Check here if entry is None ☐ Check here if additional sheets are attached

ITEM 6: INTERESTS IN REAL PROPERTY HELD IN THE STATE

List interests in real property in the State, held during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY NUMBER	VALUE
JT	94-323 Kahuawai St., Waipahu Hawaii 96797	9-4-037-103-0000	G
JT	Kona Hawaiian Village by the Sea 75-5961 Ali'i Drive Kailua-Kona, Hawaii 96740	(3) 7-5-019-005	C

☐ Check here if entry is None ☐ Check here if additional sheets are attached

ITEM 7: INTERESTS IN REAL PROPERTY ACQUIRED

List interests in real property in the State, acquired during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION PAID	NAME OF PERSON RECEIVING THE CONSIDERATION

☒ Check here if entry is None ☐ Check here if additional sheets are attached

ITEM 8: INTERESTS IN REAL PROPERTY TRANSFERRED

List interests in real property in the State, transferred during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP,DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION RECEIVED	NAME OF PERSON FURNISHING THE CONSIDERATION

☒ Check here if entry is None

☐ Check here if additional sheets are attached

ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES

List the names of clients personally represented by you before state agencies, except in ministerial matters, for a fee or compensation during the disclosure period, excluding clients represented before courts.

NAME OF CLIENT	NAME OF STATE AGENCY
1. See attached list 2. Edna Bosque	Department of Labor and Industrial Relations Department of Health Licensing Board

☐ Check here if entry is None

☒ Check here if additional sheets are attached

ITEM 10: CREDITOR INTERESTS IN INSOLVENT BUSINESSES

List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period, if the interest has a value of \$5,000 or more.

F,SP,DC,JT	NAME AND ADDRESS OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE

☒ Check here if entry is None

☐ Check here if additional sheets are attached

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.

SIGNATURE

DATE

12/26/02

December 26, 2002

CLIENTS REPRESENTED BEFORE STATE AGENCIES

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<u>No.</u>	<u>Name</u>	<u>Name of Agency</u>
1.	AGOO, Mary Lyn	Department of Labor & Industrial Relations
2.	AMODO, Efraim	Department of Labor & Industrial Relations
3.	AMODO, Maximo	Department of Labor & Industrial Relations
4.	ANDRES, Randy	Department of Labor & Industrial Relations
5.	ANDRES, Villarin	Department of Labor & Industrial Relations
6.	BANIAGA, Paulina	Department of Labor & Industrial Relations
7.	BATUNGBACAL, Michael	Department of Labor & Industrial Relations
8.	CABUCO, Demetrio	Department of Labor & Industrial Relations
9.	CANENCIA, Alfredo	Department of Labor & Industrial Relations
10.	CALO, Cesar	Department of Labor & Industrial Relations
11.	CHING, Wilfred	Department of Labor & Industrial Relations
12.	CORPUZ, Manuel	Department of Labor & Industrial Relations
13.	COLLINS, WARD	Department of Labor & Industrial Relations

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14.	DE PERALTA, Trinidad	Department of Labor & Industrial Relations
15.	DELA CRUZ, Conrado	Department of Labor & Industrial Relations
16.	EUGENIO, Rosemarie	Department of Labor & Industrial Relations
17.	GACUSAN, Mariano	Department of Labor & Industrial Relations
18.	GAGARIN, Nestor	Department of Labor & Industrial Relations
19.	MARTINEZ, Nida	Department of Labor & Industrial Relations
20.	MATSUDA, Kevin	Department of Labor & Industrial Relations
21.	MENDOZA, Modesto	Department of Labor & Industrial Relations
22.	MENDOZA, Modesto	Department of Labor & Industrial Relations
23.	NAEOLE, Clifford	Department of Labor & Industrial Relations
24.	NISHIMOTO, Elizabeth	Department of Labor & Industrial Relations
25.	OCHOA-TIJERO, Jose	Department of Labor & Industrial Relations
26.	PACHECO, Carolee	Department of Labor & Industrial Relations
27.	PAESTE, Jeanette	Department of Labor & Industrial Relations
28.	PASCUAL, Jonalyn	Department of Labor & Industrial Relations

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29.	PASCUAL, Rosario	Department of Labor & Industrial Relations
30.	PASION, Julio	Department of Labor & Industrial Relations
31.	PERRETT, Ana	Department of Labor & Industrial Relations
32.	QUERUBIN, Rochelle	Department of Labor & Industrial Relations
33.	QUIRAY, Alicia	Department of Labor & Industrial Relations
34.	RABE, Debra	Department of Labor & Industrial Relations
35.	RECONOCE, Evelyn	Department of Labor & Industrial Relations
36.	ROZMESKI, Juanita	Department of Labor & Industrial Relations
37.	SILDORA, Arnel	Department of Labor & Industrial Relations
38.	TURK, Sandra	Department of Labor & Industrial Relations
39.	UDAN, Antonino	Department of Labor & Industrial Relations
40.	VALLESTEROS, Elizabeth	Department of Labor & Industrial Relations
41.	VEA, Noel	Department of Labor & Industrial Relations
42.	YADAO, Rosita	Department of Labor & Industrial Relations